DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DIFFERENTIAL AMPLIFIER OUTPUT STAGE

the specification of which is attached hereto unless the following is entered:

was filed on	as United State	as United States Application Number or PCT International Application Number		and was amended on (if applicable)	
I hereby state that I have reviewed and amendment referred to above.	understand the contents of	the above-identified specification	atıon, ıncludi	ng the claims, as amended by any	
I acknowledge the duty to disclose info	rmation which is material to	patentability as defined in 37	CFR §1 56.		
I hereby claim foreign priority benefits §365(a) of any PCT International appl identified below any foreign applicatior the application on which priority is clair	ication which designated at n(s) for patent or inventor's	certificate, or PCT Internation	nal applicatio	on having a filing date before that of	
Application Number	Country	Filing Date (day/mor	nth/year)	Priority Not Claimed	
None					
I hereby claim the be		AL APPLICATION(S		ion(s) listed below:	
Application Number		Filing Date			

PRIOR UNITED STATES APPLICATION(S)

I hereby claim the benefit under 35 USC §120 of any United States application(s), or §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 USC §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56 which became available between the filing date of the prior application and the patients of PCT International filing date of this application:

and the national of PC1 international filling date of		Ctatus (naterted pending shandened)
Application Number	Filing Date	Status (patented, pending, abandoned)
Application Number	• • • • • • • • • • • • • • • • • • • •	

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

John C. Altmiller (Reg. No. 25,951); Shawn W. O'Dowd (Reg. No. 34,687); Sumeet Magoon (Reg. No. 43,769) of KENYON & KENYON with offices located at 1500 K Street NW, Suite 700, Washington, DC, 20005-1257, telephone (202) 220-4200, and at 333 W. San Carlos Street, Suite 600, San Jose, CA, 95110-2711, telephone (408) 975-7500; and Alan K. Aldous (#31,905); R. Edward Brake (#37,784); Ben Burge (#42,372); Jeffrey S. Draeger (#41,000); Cynthia Thomas Faatz (#39,973); John N. Greaves (#40,362); Seth Z. Kalson (#40,670); David J. Kaplan (#41,105); Peter Lam (#44,855); Charles A. Mirho (#41,199); Leo V. Novakoski (#37,198); Thomas C. Reynolds (#32,488); Kenneth M Seddon (#43,105); Mark Seeley (#32,299); Steven P. Skabrat (#36,279); Howard A. Skaist (#36,008); Gene I. Su (#45,140); Calvin E. Wells (#43,256); Raymond J. Werner (#34,752); Robert G. Winkle (#37,474), and Charles K. Young (#39,435) of INTEL CORPORATION.

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (Cont.)

Direct telephone calls to:

Send correspondence to:

Sumeet Magoon (202) 220-4200

KENYON & KENYON 1500 K Street, NW, Suite 700 Washington, DC 20005-1257

I hereby declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

	iny patent issuing thereon.			
FULL NAME OF FIRST/JOINT INVENTOR	FAMILY NAME GRIFFIN	FIRST GIVEN NAME Jed	SECOND GIVEN NAME D.	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
i	Forest Grove	Oregon	USA	
POST OFFICE ADDRESS	POST OFFICE ADDRESS 3025 Periwinkle Street	Forest Grove	STATE & ZIP CODE/COUNTRY Oregon 97116	
Signature Led Griffin		26 bec 00		
FULL NAME OF SECOND/JOINT INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
Signature	1	Date		
FULL NAME OF THIRD/JOINT INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
Signature		Date		